Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public
▶ Information about Form 990 and its instructions is at *www.IRS.gov/form990*

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 07-01-2014 , and ending 06-30-2015

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
THE COLLEGE OF STATEN ISLAND ASSOCIATION

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
2800 VICTORY BOULEVARD NO 1C-202

City or town, state or province, country, and ZIP or foreign postal code
STATEN ISLAND, NY 10314

D Employer identification number
13-2933777

E Telephone number
(718) 982-3084

G Gross receipts $ 3,522,757

F Name and address of principal officer
JENNIFER S BORRERO
2800 VICTORY BOULEVARD NO 1C-202
STATEN ISLAND, NY 10314

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW CSI CUNY EDU

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1978 **M** State of legal domicile NY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
TO DEVELOP AND CULTIVATE EDUCATIONAL, SOCIAL, CULTURAL, AND RECREATIONAL ACTIVITIES AMONG STUDENTS OF THE COLLEGE OF STATEN ISLAND

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	13
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	6
5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	126
6	Total number of volunteers (estimate if necessary)	6	50
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	645,590	695,411
	9	Program service revenue (Part VIII, line 2g)	2,579,352	2,541,075
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	226,809	32,582
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	26,635	662
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,478,386	3,269,730
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	113,426	195,502
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,716,745	1,756,657
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,163,466	1,633,031
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,993,637	3,585,190
	19	Revenue less expenses Subtract line 18 from line 12	484,749	-315,460
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	4,021,649	3,682,368
	21	Total liabilities (Part X, line 26)	357,640	373,851
	22	Net assets or fund balances Subtract line 21 from line 20	3,664,009	3,308,517

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** | 2016-04-01
Signature of officer | Date

JENNIFER S BORRERO PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
JOHN T O'BRIEN MBA MST	JOHN T O'BRIEN MBA MST	2016-04-01		P01253588

Firm's name ▶ EFPR GROUP CPAS PLLC | Firm's EIN ▶ 47-4526160

Firm's address ▶ 6390 MAIN STREET SUITE 200 WILLIAMSVILLE, NY 14221 | Phone no (716) 634-0700

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission

THE COLLEGE OF STATEN ISLAND ASSOCIATION, INC OF THE CITY UNIVERSITY OF NEW YORK IS A NONPROFIT CORPORATION CREATED FOR THE PRINCIPAL PURPOSE OF DEVELOPING AND CULTIVATING EDUCATIONAL, SOCIAL, CULTURAL, AND RECREATIONAL ACTIVITIES AMONG STUDENTS OF THE COLLEGE OF STATEN ISLAND IT ASSISTS STUDENTS WITH THEIR STUDY, WORK, LIVING, CIRRICULAR, AND CO-CIRRICULAR ACTIVITIES, AND ASSISTS THE COLLEGE IN ITS STUDENT RELATED OPERATIONS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 907,259 including grants of $) (Revenue $ 212,030)

CHILD CARE - SEE SCHEDULE O QUALITY CHILD CARE AND EARLY EDUCATION PROGRAMS WERE PROVIDED FOR CHILDREN OF CSI STUDENTS WHILE THEY WERE ATTENDING CLASSES AND PARTICIPATING IN OTHER SCHOOL-RELATED ACTIVITIES THESE PROGRAMS INCLUDED AN INFANT/TODDLER PROGRAM, A PRESCHOOL PROGRAM AND A DEPARTMENT OF EDUCATION-SPONSORED UNIVERSAL PRE-KINDERGARTEN (UPK) PROGRAM ACCOMMODATING APPROXIMATELY 120 CHILDREN PER SEMESTER THE CHILDREN'S CENTER ALSO SERVED AS A SITE FOR COURSE-REQUIRED STUDENT OBSERVATIONS AND FIELDWORK DURING THE 2014/2015 ACADEMIC YEAR, ONE STUDENT FROM THE PSYCHOLOGY DEPARTMENT COMPLETED 120 HOURS OF SUPERVISED PRACTICUM IN THE PRESCHOOL ROOMS UNDER THE MENTORSHIP OF THE EDUCATIONAL DIRECTOR THESE STUDENTS ASSISTED THE TEACHERS IN COLLECTING THE PARENTS' INPUT ON EACH OF THEIR CHILDREN'S DEVELOPMENT UTILIZING THE DEVEREUX EARLY CHILDHOOD ASSESSMENT SURVEY THE RESULTS OF THE SURVEY CONTINUE TO INFORM THE TEACHERS ABOUT THE INDIVIDUAL SOCIAL AND EMOTIONAL DEVELOPMENT OF EACH CHILD IN THE GROUP FOR THE PURPOSE OF PLANNING AN APPROPRIATE CURRICULUM APPROXIMATELY 95 CSI PSYCHOLOGY AND EDUCATION STUDENTS WERE ACCOMMODATED AT THE CENTER TO CONDUCT COURSE-RELATED OBSERVATIONS OF CHILDREN AGES SIX MONTHS TO SIX YEARS OF AGE THE OBSERVATIONS OF CHILD DEVELOPMENT OCCURRED FOR A PERIOD OF ONE TO 20 HOURS OVER A SEMESTER DURING THE SPRING SEMESTER, 28 CLIP STUDENTS, UNDER THE SUPERVISION OF THEIR PROFESSOR, VISITED THE CENTER FOR A TOUR AND PARTICIPATED IN A SHORT OBSERVATION TO GATHER INFORMATION ABOUT THE FUNCTIONING OF QUALITY CHILDCARE SERVICES ONE STUDENT FROM THE EDUCATION PROGRAM COMPLETED 150 HOURS OF FIELDWORK EXPERIENCE DURING THE SPRING SEMESTER FIVE STUDENTS FROM THE NURSING DEPARTMENT OBSERVED IN THE CLASSROOMS FOR TYPICAL DEVELOPMENT OF THE YOUNG CHILD THE CENTER SERVED AS A WORK SETTING FOR SIX COLLEGE WORK-STUDY STUDENTS THE DIRECTOR ATTENDED MONTHLY MEETINGS OF THE CHILD CARE COUNCIL AT CUNY AND PLAYED AN INSTRUMENTAL ROLE IN CONTINUED FUNDING FOR THE PROGRAM BASED ON THE SUBMISSION OF A REQUEST FOR PROPOSAL AND AN EXTERNAL REVIEW OF THE CENTER'S OPERATIONS BY THE NEW YORK CITY DEPARTMENT OF EDUCATION OFFICE OF EARLY CHILDHOOD EDUCATION, THE CENTER WAS AWARDED A NEW CONTRACT TO PROVIDE 20 FULL-DAY UPK SEATS FOR A THREE-YEAR PERIOD (2014 - 2017) ADDITIONALLY, THE EDUCATIONAL DIRECTOR AND TWO OF THE HEAD TEACHERS PRESENTED A WORKSHOP ENTITLED "THE VALUE OF PLAY" AT THE CUNY CHILD CARE PROFESSIONAL STAFF DEVELOPMENT CONFERENCE A COLLEGE LIFE UNITS OF EXPERIENCE (CLUE) WORKSHOP WAS OFFERED FOR THE PARENTS AND STUDENTS AT THE COLLEGE ENTITLED "TYPICAL DEVELOPMENT OF A PRESCHOOLER RESOURCES TO HELP EACH CHILD REACH HIS/HER POTENTIAL " EXPENSES $907,259 GRANTS $0 REVENUE $212,030

4b (Code) (Expenses $ 1,104,910 including grants of $ 104,989) (Revenue $ 1,104,910)

COLLEGE SUPPORT - SEE SCHEDULE O IN GENERAL, FUNDING WAS PROVIDED TO ASSIST COLLEGE OFFICES WITH PROVIDING QUALITY SERVICES AND PROGRAMS THAT SUPPORT THE COLLEGE'S ACADEMIC MISSION AND ENHANCE THE LEARNING AND DEVELOPMENT OF ITS WIDELY DIVERSE POPULATION OF STUDENTS SUPPORT INCLUDED, BUT WAS NOT LIMITED TO, FUNDING FOR PROFESSIONAL AND SUPPORT STAFF IN THE COLLEGE'S OFFICES OF STUDENT LIFE, CAMPUS CENTER, INTERCOLLEGIATE ATHLETICS, STUDENT GOVERNMENT OFFICE, AND THE HEALTH AND WELLNESS CENTER AS WELL AS THE CHILDREN'S CENTER STUDENT ACTIVITY FEES WERE UTILIZED TO RENOVATE AND/OR FURNISH SEVERAL COLLEGE SPACES INCLUDING THE RADIO STATION, ATHLETICS FACILITIES, THE ASSOCIATION OFFICE, THE COLLEGE HEALTH CENTER, STUDENT PUBLICATION OFFICES, THE STUDENT GOVERNMENT, THE STUDENT LEADER OFFICE AND TO CREATE A NEW STUDENT LOUNGE FOR THE CENTER FOR STUDENT ACCESSIBILITY FUNDING WAS PROVIDED FOR REPLACING THE PUBLIC ADDRESS SOUND SYSTEM IN THE MAIN GYMNASIUM, NEW SCOREBOARDS WERE PURCHASED FOR THE COLLEGE'S BASEBALL AND SOFTBALL FIELDS, NEW DIVING BOARDS WERE PURCHASED FOR THE COLLEGE'S POOL, POOL TIMING EQUIPMENT WAS REPLACED, LIGHTING WAS REPLACED IN THE AUXILIARY GYMNASIUM, AND OTHER COSMETIC CHANGES WERE MADE IN THE CSI POOL IN ADDITION, NEW EQUIPMENT WAS PURCHASED FOR THE TRAINING ROOM INCLUDING REPLACEMENT OF THE COLD COMPRESSION UNIT AND PURCHASE OF A STIM UNIT FOR REHABILITATION OF ATHLETIC INJURIES FUNDING WAS ALSO PROVIDED TO SUPPORT THE COLLEGE'S COMMENCEMENT EXERCISES, NURSING PINNING CEREMONIES, ANNUAL AWARDS BANQUETS INCLUDING THE SECOND ANNUAL STUDENT LEADERSHIP AWARDS CEREMONY, THE HONORS CONVOCATION AND OTHER COMMENCEMENT-RELATED ACTIVITIES STUDENT ACTIVITY FEE FUNDING PROVIDED SUPPORT FOR A NUMBER OF HEALTH AND WELLNESS SERVICES PROGRAMS AND SERVICES INCLUDING A NURSE PRACTITIONER, PART-TIME NURSING HOURS AND COLLEGE ASSISTANT SUPPORT THE NURSE PRACTITIONER PROVIDED PHYSICAL EXAMS, DIAGNOSES AND TREATMENT OF COMMON ACUTE ILLNESS AND INJURY, IMMUNIZATIONS, ORDERED AND INTERPRETED LAB TESTS AND PRESCRIBED MEDICATION, AS INDICATED DURING THE 2014-2015 ACADEMIC YEAR THE NURSE PRACTITIONER HANDLED APPROXIMATELY 1,600 STUDENT VISITS THE SEXUALLY TRANSMITTED INFECTION TESTING AND TREATMENT PROGRAM SERVED OVER 200 STUDENTS THE REPRODUCTIVE HEALTH PROGRAM GENERATED 389 APPOINTMENTS RELATED TO GYNECOLOGICAL EXAMS, BIRTH CONTROL AND/OR WOMEN'S HEALTH SYMPTOMS AND TREATMENT 150 STUDENTS RECEIVED THE FLU VACCINE AND THE TETANUS/TDAP VACCINE WAS MADE AVAILABLE TO STUDENTS TO ASSIST THEM WITH MEETING EDUCATIONAL PLACEMENT REQUIREMENTS AS WELL AS WHEN MEDICALLY NECESSARY ADDITIONALLY, 126 STUDENTS WERE SEEN FOR NUTRITION SESSIONS AS PART OF THE CENTER'S NUTRITION/WEIGHT LOSS PROGRAM WHICH WAS PARTIALLY FUNDED WITH STUDENT ACTIVITY FEES PROVIDED DURING 2014-2015, HEALTH AND WELLNESS SERVICES RECEIVED FUNDING FROM STUDENT ACTIVITY FEES TO RENOVATE EXAM ROOMS, INCLUDING NEW CABINETS AND COUNTERTOPS, AND TO PURCHASE MEDICAL EQUIPMENT (ADA COMPLIANT EXAM TABLE, PHLEBOTOMY CHAIR, URINE DIPSTICK ANALYZER, MOBILE AUTOMATED VITAL SIGNS DEVICE AND RESTING BEDS) TO MORE EFFECTIVELY SERVE STUDENTS SUPPORT WAS ALSO PROVIDED FOR HEALTH EDUCATION PROGRAMMING IN THE FORM OF PROMOTIONAL ITEMS AND REFRESHMENTS FOR SELECT EVENTS, INCLUDING THE ANNUAL CUNY WELLNESS FAIR OVER 1,000 STUDENTS PARTICIPATED IN WELLNESS PREVENTION PROGRAMMING THAT WAS PARTIALLY FUNDED BY STUDENT ACTIVITY FEES EVENTS INCLUDED THE ANNUAL "GET FIT" PROGRAM, TWO "CONSENT" EVENTS, AND VARIOUS WORKSHOPS RELATED TO SAFER SEX, NUTRITION, AND ALCOHOL ABUSE PREVENTION TWO ON-LINE HEALTH EDUCATION PROGRAMS WERE PURCHASED USING THE SA FEE STUDENT HEALTH 101, AN ON-LINE MAGAZINE, WAS VIEWED OVER 1,200 TIMES DURING THE ACADEMIC YEAR AND WAS EVALUATED VERY HIGHLY BY STUDENTS THE PERSONALIZED, EVIDENCED-BASED PREVENTION PROGRAM ADDRESSING ALCOHOL AND MARIJUANA USE, ECHECKUP, WAS USED FOR 541 STUDENT SCREENINGS AND HAS BEEN INCORPORATED INTO THE CENTER'S EDUCATIONAL SANCTIONS PROGRAM STUDENT GOVERNMENT'S ACADEMIC AND CURRICULAR AFFAIRS COMMISSION CONTINUED TO SUPPORT THE TRAVEL ASSISTANCE FUND, WHICH SUBSIDIZES THE COSTS FOR STUDENTS WHO HAVE BEEN INVITED TO PRESENT ALONG WITH FACULTY AT ACADEMIC CONFERENCES THE GRADUATE ASSISTANCE PROGRAM, WHICH HELPS STUDENTS WITH COSTS ASSOCIATED WITH THE GRADUATE SCHOOL APPLICATION PROCESS, WAS CONTINUED AN EDUCATIONAL PERIODICAL PROGRAM WHICH PROVIDED DIFFERENT DEPARTMENTS AND MAJORS WITH SUBSCRIPTIONS TO VARIOUS JOURNALS, MAGAZINES OR NEWSPAPERS FOR STUDENT ACADEMIC USE WAS ESTABLISHED THROUGH THE STUDENT GOVERNMENT, COLLEGE SUPPORT FOR INITIATIVES SUCH AS COLLEGE MEMORIAL SCHOLARSHIPS, DEPARTMENTAL ACADEMIC SCHOLARSHIPS, TEXTBOOKS FOR THE LIBRARY AND STUDENT EMERGENCY LOANS FOR STUDENTS IN NEED WERE CONTINUED ADDITIONALLY, A NEW STUDY ABROAD SCHOLARSHIP PROGRAM WAS FUNDED, MAKING IT POSSIBLE FOR STUDENTS TO ENRICH THEIR COLLEGIATE EXPERIENCE BY TAKING ADVANTAGE OF STUDY ABROAD OPPORTUNITIES STUDENT GOVERNMENT ALSO CONTINUED ITS SUPPORT FOR THE ANNUAL STUDENT LEADERSHIP RETREAT, ADDING THE LEAD 365 CONFERENCE TO ITS INITIATIVES TO HELP TRAIN AND PREPARE STUDENT LEADERS TO BECOME FUTURE LEADERS THE CAMPUS ACTIVITIES BOARD (CAB)PROVIDED FUNDING FOR COMMUNITY PROPOSALS INCLUDING PROGRAMS SUCH AS CAREERS IN LAW LECTURES, COMPOSERS NOW CONCERT, GLOBAL KITCHEN LECTURE, INTERNATIONAL EDUCATION WEEK, MAKE MONEY/BE HAPPY, MOOD MATTERS, MY STORY, NATIVE AMERICAN POW WOW, RELAXATION STATION, SPEAK ABOUT IT, WOMEN'S CENTER SPRING FLING, WORLD LANGUAGE DAY, UN MILLENIUM DEVELOPMENT, GUERILLA GIRLS AND FAGBUG NATION CAB MAINTAINED ITS SUPPORT OF OTHER COLLEGE PROGRAMS INCLUDING FUNDING ANNUAL EVENTS SUCH AS FRESHMEN CONVOCATION, CSI LEADERSHIP CONFERENCE, CSI'S GOT TALENT, NEW STUDENT ORIENTATION, RELAY FOR LIFE AND THE HONORS CONVOCATION THROUGH THEIR SPECIAL COMMUNITY PROPOSAL FUND, THE STUDENT GOVERNMENT SUPPORTED VARIOUS SOCIAL AND ACADEMIC PROGRAMS ON CAMPUS INCLUDING THE ASIAN CULTURE DAY, INTERNATIONAL CAREER FAIR, FRESHMEN CONVOCATION, THE CSI COMMENCEMENT VIDEO, AFRICAN DISAPORA CONFERENCE AND THE SCHOOL OF BUSINESS ORIENTATION PROGRAM IN ADDITION, THEY FUNDED REFURBISHING OF THE COLLEGE'S PERFORMING AND CREATIVE ARTS DEPARTMENT'S GRAND CONCERT PIANO AND THE INSTALLATION OF THIRTY PARK BENCHES ACROSS CAMPUS IN THE FALL OF 2014, THE COLLEGE OF STATEN ISLAND'S DIVISION OF STUDENT AFFAIRS / OFFICE OF STUDENT LIFE HOSTED THEIR ANNUAL LEADERSHIP CONFERENCE ETHICS IN ACTION A LEADERSHIP CONFERENCE ON ETHICS AND SOCIAL RESPONSIBILITY THE EVENT WAS OPEN TO CSI STUDENTS, FACULTY AND STAFF AND THE GREATER STATEN ISLAND COMMUNITY AND PROVIDED AN OPPORTUNITY FOR STUDENTS AND PROFESSIONALS TO MEET, SHARE IDEAS, NETWORK AND TO DISCUSS WHAT IT TAKES TO BUILD AN ORGANIZATIONAL CULTURE IMBUED IN STRONG ETHICS AND HOW LEADERS FROM ACROSS VARIOUS FIELDS CAN LEARN FROM EACH OTHER TO ENHANCE AND RENEW ORGANIZATIONS AND CULTURES THAT BENEFIT CSI, CUNY, NEW YORK AND BEYOND THIS LEADERSHIP CONFERENCE WAS A FULL DAY EVENT THAT PROVIDED THE OPPORTUNITY FOR PARTICIPANTS TO ACQUIRE AND DEVELOP THE KNOWLEDGE AND SKILLS NEEDED TO LEAD DIVERSE, ETHICAL CLUBS AND ORGANIZATIONS HERE AT CSI AND IN THE COMMUNITY AT LARGE THE EVENT HAD TWO KEYNOTE SPEAKERS, MR JOE URBANSKI AND MR EYAL PRESS THE KEYNOTE SPEAKERS BOTH LECTURED ABOUT THE IMPORTANCE OF ETHICS ON AN INDIVIDUAL LEVEL AND AT A MACRO-ORGANIZATIONAL LEVEL THIS PROGRAM, A COLLABORATIVE INITIATIVE OF THE DIVISION OF STUDENT AFFAIRS / OFFICE OF STUDENT LIFE, CAMPUS ACTIVITIES BOARD, CSI STUDENT GOVERNMENT AND THE CSI ASSOCIATION, WAS MADE POSSIBLE IN PART BY THE STUDENT ACTIVITY FEE EXPENSES $1,104,910 GRANTS $104,989 REVENUE $1,104,910

4c (Code) (Expenses $ 638,384 including grants of $ 15,456) (Revenue $ 598,340)

ATHLETICS & RECREATION - SEE SCHEDULE O THROUGH INVOLVEMENT WITHIN THE INTRAMURAL PROGRAM, STUDENTS WERE PROVIDED WITH OPPORTUNITIES TO STRENGTHEN THE BODY AS WELL AS THE MIND WHILE HAVING SOME FRIENDLY COMPETITION OVER 500 STUDENTS PER WEEK TOOK ADVANTAGE OF WEEKLY ON-CAMPUS INTRAMURAL ACTIVITIES INCLUDING MULTIPLE LEAGUES, TOURNAMENTS, SPECIAL EVENTS (INCLUDING STUDENTS VS FACULTY/STAFF GAMES), A GAME ROOM (WITH POOL TABLES, TABLE TENNIS, FOOSBALL, AIR HOCKEY, CARDS AND BOARD GAMES), OPEN RECREATION TIME IN THE GYM, AND WEEKLY INSTRUCTIONAL SESSIONS (SWIMMING & TENNIS) EACH ACTIVITY IMPLEMENTED WAS AIMED AT MEETING THE VARIED INTERESTS OF STUDENTS, REGARDLESS OF THEIR ABILITY OR SKILL, AS WELL AS ENCOURAGING STUDENT INVOLVEMENT, PHYSICAL FITNESS, AND BUILDING CAMPUS COMMUNITY THE INTRAMURAL FACEBOOK PAGE REACHED OVER 250 LIKES AND HAS BEEN USED FOR STUDENTS TO SHOWCASE THEIR INTRAMURAL WINS IN ADDITION, AN INSTAGRAM PAGE WAS CREATED FOR INTRAMURALS, ATTRACTING OVER 100 FOLLOWERS PRIZES WERE UPGRADED TO INCLUDE GIFT CARDS AND CHAMPIONSHIP T-SHIRTS FOR ALL LEAGUES AND TOURNAMENTS IN ADDITION, THE INTRAMURAL ADVISORY COUNCIL (IAC) REACHED A HIGH OF 20 MEMBERS WHO HELPED PROMOTE MANY EVENTS WHILE VOLUNTEERING THEIR TIME TO ASSIST IN MAKING THE EVENTS SUCCESSFUL DURING THE YEAR, THE INTRAMURAL PROGRAM COLLABORATED WITH MULTIPLE DEPARTMENTS INCLUDING HOUSING, THE CENTER FOR INTERNATIONAL SERVICES, AND THE LESBIAN, GAY, BISEXUAL, TRANSGENDER, QUEER (LGBTQ) RESOURCE CENTER TO BRING MORE STUDENTS TOGETHER COLLABORATIVE ACTIVITIES INCLUDED "FLOOR WARS", "INTERNATIONAL SPORTS DAY AND A "TAKE ME OUT TO THE PRIDE GAME " ADDITIONALLY, DANNY THE DOLPHIN, THE COLLEGE'S MASCOT, MADE APPEARANCES AT CAMPUS EVENTS INCLUDING NEW STUDENT ORIENTATION SESSIONS, VARSITY SPORTS GAMES, CONVOCATIONS, GRADUATION, AND MOVE-IN DAY AS WELL AS OTHER ON-CAMPUS EVENTS A TWITTER PAGE WAS ESTABLISHED FOR DANNY THE DOLPHIN @CSI_DOLPHIN DANNY THE DOLPHIN WAS FEATURED IN THE COLLEGE'S TRASH TALK CAMPAIGN WHICH WAS LAUNCHED IN 2015 FOR THE THIRD YEAR IN A ROW, THE INTRAMURAL & RECREATION PROGRAM WON THE PARTICIPATION CHAMPIONSHIP TITLE FOR THE THE CITY UNIVERSITY OF NEW YORK ATHLETIC CONFERENCE (CUNYAC) INTRAMURALS CHAMPIONSHIP SERIES, WHICH INCLUDES COMPETITION AGAINST OTHER CUNY INTRAMURAL CHAMPIONS IN SELECT SPORTS AS PART OF THIS PARTICIPATION, A CSI STUDENT WAS CROWNED THE CUNYAC BOWLING CHAMPIONSHIP IN INAUGURAL YEAR FUNDING WAS PROVIDED FOR 14 NCAA DIVISION III ATHLETIC TEAMS PLUS CSI'S BUDDING CLUB SPORTS OF COEDUCATIONAL CHEERLEADING, AND MEN'S AND WOMEN'S TRACK & FIELD UNDER THE GUIDANCE AND SUPERVISION OF SOME OF THE REGION'S AND NATION'S BEST COACHES, APPROXIMATELY 200 STUDENT-ATHLETES PARTICIPATED IN APPROXIMATELY 250 HOME AND AWAY CONTESTS THROUGHOUT THE YEAR, CUNYAC AWARDED CSI WITH OVER 30 WEEKLY AND ALL-STAR CITATIONS CSI ATHLETES WERE ALSO CITED WITH NUMEROUS AWARDS FROM OUTSIDE ORGANIZATIONS LIKE THE NATIONAL ASSOCIATION OF BASKETBALL COACHES, METROPOLITAN BASKETBALL WRITERS ASSOCIATION, AND THE EASTERN COLLEGE ATHLETIC CONFERENCE CSI WON CUNYAC CHAMPIONSHIPS IN WOMEN'S SOFTBALL, MEN'S CROSS-COUNTRY, WOMEN'S TENNIS, MEN'S SWIMMING & DIVING, AND MEN'S BASEBALL TWO OTHER CSI SPORTS FINISHED AS CONFERENCE RUNNERS-UP BY SEASON'S END AS WELL ON THE ACADEMIC SIDE, OVER 40% OF CSI'S ATHLETES WERE DESIGNATED AS SCHOLAR-ATHLETES FOUR SUCH ATHLETES WERE HIGHLIGHTED BY THE CUNYAC AS SCHOLAR ATHLETE OF THE YEAR HONORABLE MENTIONS AND ANOTHER WON CSI'S SCHOLAR-ATHLETE OF THE YEAR HONORS AT THE STUDENT ACTIVITY FEE-FUNDED ANNUAL CSI AWARDS BANQUET IN MAY EXPENSES $638,384 GRANTS $15,456 REVENUE $598,340

See Additional Data

4d Other program services (Describe in Schedule O)

(Expenses $ 627,319 including grants of $ 75,057) (Revenue $ 626,457)

4e Total program service expenses ▶ 3,277,872

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV **Checklist of Required Schedules** *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	51			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	126			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 13			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	1b 6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		5		No
6	Did the organization have members or stockholders?		6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9		No

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶NY

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records
▶MARIANNE MCLAUGHLIN

2800 VICTORY BOULEVARD ROOM 1C-202
STATEN ISLAND, NY 10314 (718) 982-3084

Part VII **Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII . . . . ☑

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) ARAMONA BROWN PRESIDENT	3 00	X		X				0	166,983	42,109
(2) TAIWO ADENAKAN OFFICER	0 70	X		X				0	0	0
(3) KEHINDE ADENAKAN OFFICER	0 70	X		X				0	0	0
(4) JETA KRASNIQI OFFICER	0 70	X		X				0	0	0
(5) EDUARDO RIOS DIRECTOR	0 70	X						0	142,469	53,529
(6) CHARLES GOMES DIRECTOR	0 70	X						0	107,400	34,982
(7) LINDA CONTE DIRECTOR	0 70	X						0	101,023	13,003
(8) ALAN BENIMOFF DIRECTOR	0 70	X						0	92,035	34,892
(9) ALAN WEINMAN DIRECTOR	0 70	X						0	27,842	9,171
(10) MOHAMMAD TALAFHA DIRECTOR	0 70	X						0	86,506	18,718
(11) RANA MOHAMMAD DIRECTOR	0 70	X						0	0	0
(12) SANDRA KURYLONEK DIRECTOR	0 70	X						0	0	0
(13) SUELA DUKA DIRECTOR	0 70	X						0	0	0
(14) MARIANNE MCLAUGHLIN EXECUTIVE DIRECTOR	35 00			X				118,033	0	25,698

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(15) CYNTHIA MURPHY EXECUTIVE DIRECTOR - CHILD	35 00					X		106,902	0	24,752

		(D)	(E)	(F)
1b	**Sub-Total** ▶			
c	**Total from continuation sheets to Part VII, Section A** ▶			
d	**Total (add lines 1b and 1c)** ▶	224,935	724,258	256,854

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶2

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶0

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . ☐

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations . . .	1d					
	e	Government grants (contributions)	1e	695,411				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f					
	g	Noncash contributions included in lines 1a-1f $						
	h	**Total.** Add lines 1a-1f . . . . ▶			695,411			
Program Service Revenue				Business Code				
	2a	STUDENT ACTIVITY FEES		611710	2,440,348	2,440,348		
	b	CHILDCARE PARENT FEES		611710	75,689	75,689		
	c	SPORTS INCOME		611710	14,322	14,322		
	d	STUDENT ORGANIZATIONS		611710	10,716	10,716		
	e							
	f	All other program service revenue						
	g	**Total.** Add lines 2a–2f . . . . ▶			2,541,075			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶			26,542			26,542
	4	Income from investment of tax-exempt bond proceeds . . ▶						
	5	Royalties . . . . ▶						
			(i) Real	(ii) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss) . . . . ▶						
			(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory	259,067					
	b	Less cost or other basis and sales expenses	253,027					
	c	Gain or (loss)	6,040					
	d	Net gain or (loss) . . . . ▶			6,040			6,040
	8a	Gross income from fundraising events (not including $ ____ of contributions reported on line 1c) See Part IV, line 18 . .	a					
	b	Less direct expenses . . .	b					
	c	Net income or (loss) from fundraising events . . ▶						
	9a	Gross income from gaming activities See Part IV, line 19 . . .	a					
	b	Less direct expenses . . .	b					
	c	Net income or (loss) from gaming activities . . ▶						
	10a	Gross sales of inventory, less returns and allowances .	a					
	b	Less cost of goods sold . .	b					
	c	Net income or (loss) from sales of inventory . . ▶						
		Miscellaneous Revenue		Business Code				
	11a	RECOVERY OF BAD DEBT		611710	364	364		
	b	MISCELLANEOUS		611710	298	298		
	c							
	d	All other revenue						
	e	**Total.** Add lines 11a–11d . . . . ▶			662			
	12	**Total revenue.** See Instructions . . . . . ▶			3,269,730	2,541,737	0	32,582

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX . . . . ☑

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	99,930	99,930		
2	Grants and other assistance to domestic individuals See Part IV, line 22	95,572	95,572		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	142,062		142,062	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,282,342	1,218,546	63,796	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	62,514	52,923	9,591	
9	Other employee benefits	123,660	101,518	22,142	
10	Payroll taxes	146,079	118,696	27,383	
11	Fees for services (non-employees)				
a	Management				
b	Legal	7,400	1,900	5,500	
c	Accounting	8,700		8,700	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	127,817	113,793	14,024	
12	Advertising and promotion	72,429	72,011	418	
13	Office expenses	25,478	20,911	4,567	
14	Information technology	35,690	35,066	624	
15	Royalties	29,704	27,936	1,768	
16	Occupancy				
17	Travel	223,390	223,235	155	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	13,091	12,931	160	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	39,791	36,871	2,920	
23	Insurance	39,976	37,467	2,509	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	ATHLETICS	223,917	223,917		
b	RECEPTIONS/REFRESHMENTS	150,157	149,686	471	
c	STUDENT ACTIVITIES	127,452	127,452		
d	FURNITURE	126,474	126,474		
e	All other expenses	381,565	381,037	528	
25	**Total functional expenses.** Add lines 1 through 24e	3,585,190	3,277,872	307,318	0
26	**Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X . . . . ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		1	
	2	Savings and temporary cash investments	2,011,395	2	1,996,247
	3	Pledges and grants receivable, net	9,105	3	13,719
	4	Accounts receivable, net	438,946	4	146,581
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net	4,070	7	5,878
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	30,304	9	28,315
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a 354,617			
	b	Less accumulated depreciation — 10b 261,917	104,960	10c	92,700
	11	Investments—publicly traded securities	1,422,869	11	1,398,928
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	4,021,649	16	3,682,368
Liabilities	17	Accounts payable and accrued expenses	236,735	17	239,720
	18	Grants payable		18	
	19	Deferred revenue	103,775	19	109,893
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D	17,130	21	24,238
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	357,640	26	373,851
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets		27	
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds	3,559,049	30	3,215,817
	31	Paid-in or capital surplus, or land, building or equipment fund	104,960	31	92,700
	32	Retained earnings, endowment, accumulated income, or other funds	0	32	0
	33	Total net assets or fund balances	3,664,009	33	3,308,517
	34	Total liabilities and net assets/fund balances	4,021,649	34	3,682,368

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,269,730
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,585,190
3	Revenue less expenses Subtract line 2 from line 1	3	-315,460
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,664,009
5	Net unrealized gains (losses) on investments	5	-40,032
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,308,517

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . ☑

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☑ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		No
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:
Software Version:
EIN: 13-2933777
Name: THE COLLEGE OF STATEN ISLAND ASSOCIATION

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses $ 627,319 including grants of $ 75,057) (Revenue $ 626,457)

DURING FISCAL YEAR 2015, FUNDS WERE EXPENDED TO CONTINUE THE PROVISION OF A WIDE RANGE OF PROGRAMS, SERVICES AND ACTIVITIES FOR STUDENTS AIMED AT SUPPORTING, ENHANCING AND COMPLEMENTING THEIR ACADEMIC EXPERIENCE AND ENCOURAGING THEM TO BECOME INVOLVED IN CAMPUS LIFE THROUGH INVOLVEMENT WITH STUDENT GOVERNMENT, THE RADIO STATION, CLUBS AND ORGANIZATIONS, THE CAMPUS ACTIVITIES BOARD (CAB), PUBLICATIONS, ATHLETICS, INTRAMURAL AND RECREATION PROGRAMS, AND OTHER CAMPUS COMMITTEES, STUDENTS WERE PROVIDED WITH OPPORTUNITIES TO LEARN AND PRACTICE LEADERSHIP, PROGRAMMING, MANAGEMENT, SOCIAL RESPONSIBILITY AND INTERPERSONAL SKILLS OPPORTUNITIES FOR INCREASED INTERACTION AMONG STUDENTS, FACULTY AND STAFF FROM DIVERSE CULTURAL BACKGROUNDS AS WELL AS OPPORTUNITIES TO MAKE FRIENDS, SOCIAL BONDS AND HAVE FUN WERE PROVIDED THROUGH ON-CAMPUS PARTIES, MUSICAL EVENTS, LECTURES, COMEDY SHOWS, AND SPECIAL EVENTS, AS WELL AS THROUGH OFF-CAMPUS OUTINGS TO THEATRICAL PERFORMANCES, AMUSEMENT PARKS AND OTHER POINTS OF INTEREST THE STUDENT GOVERNMENT PRESENTED A STRONG MIXTURE OF NEW PROGRAMMING AND A CONTINUATION OF PROGRAMS PREVIOUSLY ESTABLISHED FOR THE STUDENT BODY A FREELANCE GRAPHIC DESIGNER WAS HIRED TO FACILITATE STUDENT GOVERNMENT'S DESIGN AND WEBSITE INITIATIVES EVENTS SPONSORED BY THE STUDENT GOVERNMENT INCLUDED SPIRIT WEEK, TWIN DAY DANCE WITH PRIZES FOR BEST COSTUMES, IT'S A WONDERFUL LIFE HOLIDAY PARTY, NON-THANKSGIVING DANCE, HALLOWEEN FAMILY FRIENDLY BRUNCH, AND SPRING FLING BRUNCH, AS WELL AS, THE MEET THE SENATORS AND MEET THE ADMINISTRATORS NETWORKING EVENTS THE PART-TIME, EVENING AND WEEKEND STUDENTS COMMISSION CONTINUED ITS SUPPORT OF THE COFFEE HOUR PROGRAM THE CLUB COMMISSION CONTINUED TO FUND STUDENT-RUN CLUBS OF VARYING INTERESTS, RANGING FROM POLITICS TO RELIGION TO EXTRACURRICULAR ACTIVITIES AND HOBBIES THROUGH THE STUDENT GOVERNMENT CLUB COMMISSION, 45 STUDENT CLUBS WERE CHARTERED, INCLUDING NINE NEW CLUBS OVER 2,481 STUDENTS WERE MEMBERS OF CLUBS THROUGHOUT THE YEAR, CLUBS SPONSORED OVER 256 EVENTS WITH OVER 3,693 STUDENTS PARTICIPATING AND HOSTED 445 MEETINGS THE OFFICE OF STUDENT LIFE, IN COLLABORATION WITH THE SG CLUB COMMISSIONER, HOSTED 25 BUDGET WORKSHOPS WITH 93 LEADERS PARTICIPATING INVOLVEMENT IN CLUBS PROVIDED STUDENTS WITH THE OPPORTUNITY TO COMPLEMENT THEIR ACADEMIC PROGRAM OF STUDY, AND BECOME EDUCATED ABOUT A NUMBER OF ISSUES IN OUR SOCIETY AND WORLD, INCLUDING EQUALITY AND GENDER ISSUES, SUSTAINABILITY, THE VALUE OF HELPING THOSE IN NEED, AND THE NEED FOR PEACE AROUND THE WORLD CLUBS COLLABORATED ON A NUMBER OF EVENTS THROUGHOUT THE YEAR THE HILLEL CLUB HELD A HIGHLY SUCCESSFUL NARCAN TRAINING PROGRAM WITH OVER 200 STUDENTS PARTICIPATING THE AMERICAN SIGN LANGUAGE CLUB FUNDRAISED FOR A NUMBER OF YEARS, IN ORDER TO HOST AN EVENT FEATURING COMEDIAN CROM SAUNDERS CLUBS TOOK AN ACTIVE ROLE IN COMMUNITY SERVICE PROJECTS INCLUDING RELAY FOR LIFE, THE ICLUB HOSTED AN ONGOING FUNDRAISER TO COLLECT EYE GLASSES, AND THE TEACHER'S SOCIETY RAISED MONEY FOR LOCAL SCHOOL TEACHERS TO BUY SCHOOL SUPPLIES FOR THEIR CLASSROOMS IN ADDITION, THE STUDENT GOVERNMENT CLUB COMMISSION FUNDED TWO LEADERSHIP TRAINING PROGRAMS THE EXECUTIVE LEADERSHIP TRAINING IN AUGUST WITH 43 STUDENT LEADERS PARTICIPATING AND THE STUDENT LEADER RETREAT IN JANUARY WITH PARTICIPATION FROM 47 STUDENT LEADERS STUDENTS WERE INVOLVED IN PUBLISHING 23 ISSUES OF FIVE DIFFERENT PUBLICATIONS (NEWSPAPERS, ART AND LITERATURE MAGAZINES, POLITICAL MAGAZINES, VISUAL ARTS MAGAZINES AND A HUMOR MAGAZINE) THE BANNER PURCHASED NEW COMPUTERS AND EQUIPMENT TO BE SHARED BY ALL OF THEIR STUDENT-STAFF AND COMPLETED A TRAINING SESSION TO BECOME ACQUAINTED WITH THIS EQUIPMENT THROUGHOUT THE YEAR THE CAMPUS ACTIVITIES BOARD (CAB) WAS ABLE TO SUCCESSFULLY PROVIDE A CALENDAR OF EVENTS FOR THE CSI STUDENT BODY AND FULFILL THE ORGANIZATION'S MISSION OVER 115 EVENTS WERE SPONSORED WITH OVER 8,445 STUDENTS PARTICIPATING A CALENDAR OF EVENTS AND ACTIVITIES WAS DEVELOPED TO PROVIDE STUDENTS WITH OPPORTUNITIES TO RELAX AND ENJOY TIME ON- AND OFF-CAMPUS WITH FELLOW STUDENTS AND MEMBERS OF THE COLLEGE COMMUNITY THESE INCLUDED LECTURES, FILMS, COMEDIANS, NOVELTY ENTERTAINMENT, SPECIAL EVENTS AND TRIPS TO LOCAL SHOWS AND POINTS OF INTEREST STUDENTS INTERESTED IN WSIA, THE COLLEGE'S STUDENT-RUN RADIO STATION, WERE PROVIDED WITH BROADCAST TRAINING AND WERE INVOLVED WITH THE STATION AS DJS, NEWSCASTERS, ENGINEERS, OR WITH UNDERWRITING SOLICITATIONS THEY TOOK PART IN BROADCASTING MUSIC, NEWS AND SPORTS PROGRAMMING 24 HOURS A DAY ON WSIA THEY ALSO PARTICIPATED IN GENERAL AND ON-AIR WORKSHOPS TO LEARN SKILLS RELATED TO RADIO BROADCASTING THE STATION PARTNERED IN COLLEGE AND COMMUNITY EVENTS INCLUDING CSI'S GOT TALENT AND RELAY FOR LIFE STUDENTS AT THE STATION WERE ALSO INVOLVED WITH BROADCASTING THE STATEN ISLAND YANKEES BASEBALL GAMES, WITH STUDENTS WORKING AS ON-AIR ANNOUNCERS AS WELL AS ON-SITE AND IN-STUDIO ENGINEERS STUDENTS FROM THE STATION ATTENDED THE SPORTS BROADCASTING CONVENTION IN NASHVILLE, TENNESSEE AND THE COLLEGE MEDIA ASSOCIATION CONVENTION IN NYC TO GAIN KNOWLEDGE AND SKILLS RELATED TO THEIR ROLES AS MEMBERS OF THE STATION efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493109011156

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047
2014
Open to Public Inspection

Name of the organization
THE COLLEGE OF STATEN ISLAND ASSOCIATION

Employer identification number
13-2933777

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state ____________

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☑ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations . . . . ____________

g Provide the following information about the supported organization(s)

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section (see instructions))	**(iv)** Is the organization listed in your governing document?		**(v)** Amount of monetary support (see instructions)	**(vi)** Amount of other support (see instructions)
			Yes	**No**		
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 **Total support** Add lines 7 through 10						

12 Gross receipts from related activities, etc (see instructions) | 12 |

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) | 14 |

15 Public support percentage for 2013 Schedule A, Part II, line 14 | 15 |

16a **33 1/3% support test—2014.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2013.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2014.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	643,332	636,583	693,642	645,590	695,411	3,314,558
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1,885,322	2,468,042	2,554,761	2,579,352	2,541,075	12,028,552
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	2,528,654	3,104,625	3,248,403	3,224,942	3,236,486	15,343,110
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b						0
8 **Public support** (Subtract line 7c from line 6)						15,343,110

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6	2,528,654	3,104,625	3,248,403	3,224,942	3,236,486	15,343,110
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	57,042	47,217	42,091	206,545	32,582	385,477
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	57,042	47,217	42,091	206,545	32,582	385,477
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	11,103	10,032	37,911	26,635	662	86,343
13 **Total support.** (Add lines 9, 10c, 11, and 12)	2,596,799	3,161,874	3,328,405	3,458,122	3,269,730	15,814,930

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	97 020 %
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	96 450 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2014** (line 10c, column (f) divided by line 13, column (f))	17	2 440 %
18 Investment income percentage from **2013** Schedule A, Part III, line 17	18	2 600 %

19a **33 1/3% support tests—2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support tests—2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶☐

Part IV **Supporting Organizations**

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***Part VI*** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	**1**		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	**2**		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	**3a**		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.*	**3b**		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	**3c**		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.*	**4a**		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.* . . .	**4b**		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	**4c**		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).*	**5a**		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	**5b**		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	**5c**		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	**6**		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990) .*	**7**		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part II of Schedule L (Form 990).*	**8**		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	**9a**		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	**9b**		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	**9c**		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer b below.*	**10a**		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).*	**10b**		
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	**11a**		
b	A family member of a person described in (a) above?	**11b**		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI.*	**11c**		

Part IV Supporting Organizations (continued)

Section B. Type I Supporting Organizations

		Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

		Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

		Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**

a ☐ The organization satisfied the Activities Test Complete **line 2** below

b ☐ The organization is the parent of each of its supported organizations Complete **line 3** below

c ☐ The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions)

		Yes	No
2 Activities Test **Answer (a) and (b) below.**			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		
3 Parent of Supported Organizations **Answer (a) and (b) below.**			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*	3b		

Part V – Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	**1**		
2	Recoveries of prior-year distributions	**2**		
3	Other gross income (see instructions)	**3**		
4	Add lines 1 through 3	**4**		
5	Depreciation and depletion	**5**		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	**6**		
7	Other expenses (see instructions)	**7**		
8	**Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	**8**		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	**1**		
a	Average monthly value of securities	**1a**		
b	Average monthly cash balances	**1b**		
c	Fair market value of other non-exempt-use assets	**1c**		
d	**Total** (add lines 1a, 1b, and 1c)	**1d**		
e	**Discount** claimed for blockage or other factors (explain in detail in Part VI) ____________			
2	Acquisition indebtedness applicable to non-exempt use assets	**2**		
3	Subtract line 2 from line 1d	**3**		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	**4**		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	**5**		
6	Multiply line 5 by 035	**6**		
7	Recoveries of prior-year distributions	**7**		
8	**Minimum Asset Amount** (add line 7 to line 6)	**8**		

	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	**1**		
2	Enter 85% of line 1	**2**		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	**3**		
4	Enter greater of line 2 or line 3	**4**		
5	Income tax imposed in prior year	**5**		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	**6**		
7	☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)			

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009. . . . . . . ____________			
b From 2010. . . . . . . ____________			
c From 2011. . . . . . . ____________			
d From 2012. . . . . . . ____________			
e From 2013. . . . . . . ____________			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 $ ____________			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 **Excess distributions carryover to 2015.** Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010. . . . . . . ____________			
b From 2011. . . . . . . ____________			
c From 2012. . . . . . . ____________			
d From 2013. . . . . . . ____________			
e From 2014. . . . . . . ____________			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493109011156

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
THE COLLEGE OF STATEN ISLAND ASSOCIATION

Employer identification number
13-2933777

Part I **Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	**(b)** Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II **Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
- ☐ Preservation of land for public use (e g , recreation or education)
- ☐ Preservation of an historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶______

4 Number of states where property subject to conservation easement is located ▶______

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶______

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ______

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included in Form 990, Part VIII, line 1 ▶ $ ______

(ii) Assets included in Form 990, Part X ▶ $ ______

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included in Form 990, Part VIII, line 1 ▶ $ ______

b Assets included in Form 990, Part X ▶ $ ______

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☑ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☑ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☑

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

		(a) Current year	(b) Prior year	b (c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance					
b	Contributions					
c	Net investment earnings, gains, and losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

			Yes	No
	(i) unrelated organizations	3a(i)		
	(ii) related organizations	3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		314,962	230,193	84,769
e Other		39,655	31,724	7,931
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				92,700

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	3,541,314
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a	-40,032		
b	Donated services and use of facilities	2b	311,616		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	271,584
3	Subtract line **2e** from line **1**			3	3,269,730
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	3,269,730

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	3,896,806
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	311,616		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	311,616
3	Subtract line **2e** from line **1**			3	3,585,190
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	3,585,190

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
PART IV, LINE 2B	THE ASSOCIATION HOLDS FUNDS ON BEHALF OF CERTAIN GROUPS AND ORGANIZATIONS RELATED TO THE COLLEGE OF STATEN ISLAND AS WELL AS FUNDS TO BE REMITTED TO CERTAIN EXTERNAL CHARITABLE ORGANIZATIONS COMPUTER SCIENCE CLUB $273 AMBASSADOR PROGRAM 204 ITALIAN CLUB 50 WOMEN'S LITERARY GROUP 308 EMERGING LEADERS PROGRAM 16 EXTERNAL CHARITABLE ORGANIZATIONS 19,375 GROUP FITNESS FUND 1,271 HURRIANE SANDY RELIEF 2,741
PART X, LINE 2	THE ASSOCIATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE), THEREFORE, NO PROVISION FOR INCOME TAXES IS REFECTED IN THE FINANCIAL STATEMENTS THE ASSOCIATION HAS BEEN CLASSIFIED AS A PUBLICLY SUPPORTED ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A) OF THE CODE THE ASSOCIATION PRESENTLY DISCLOSES OR RECOGNIZES INCOME TAX POSITIONS BASED ON MANAGEMENT'S ESTIMATE OF WHETHER IT IS REASONABLY POSSIBLE OR PROBABLE THAT A LIABILITY HAS BEEN INCURRED FOR UNRECOGNIZED INCOME TAXES MANAGEMENT HAS CONCLUDED THAT THE ASSOCIATION HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT IN ITS FINANCIAL STATEMENTS U S FORMS 990 FILED BY THE ASSOCIATION ARE SUBJECT TO EXAMINATION BY TAXING AUTHORITIES THE ASSOCIATION IS NO LONGER SUBJECT TO TAX EXAMINATION FOR THE YEARS ENDED JUNE 30, 2011, AND PRIOR

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
THE COLLEGE OF STATEN ISLAND ASSOCIATION

Employer identification number
13-2933777

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) COLLEGE OF STATEN ISLAND 2800 VICTORY BOULEVARD STATEN ISLAND, NY 10314	13-2547180	501(C)(3)	74,456	25,474	FMV	TEXTBOOKS FOR LIBRARY	SCHOLARSHIPS/AWARDS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) STIPENDS	26	75,057			
(2) GRADUATE ASSISTANCE	10	2,765			
(3) SCHOLARSHIP AWARDS	5	2,600			
(4) DEPARTMENTAL SCHOLARSHIPS	8	12,000			
(5) ACADEMIC EXCELLENCE SCHOLARSHIPS	2	1,500			
(6) MEMORIAL AWARDS	9	1,650			

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	THE ASSOCIATION MONITORS THE USAGE OF THE FUNDS BY REQUESTING AN EXPENDITURE REPORT DETAILING HOW THE FUNDS WERE USED
PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION	THE ASSOCIATION MAKES GRANTS TO ITS PARENT ORGANIZATION, THE COLLEGE OF STATEN ISLAND, FOR THE PURPOSE OF SUPPORTING ITS STUDENT SCHOLARSHIP PROGRAM ALL FUNDS REMITTED TO THE COLLEGE ARE USED TO FUND SCHOLARSHIPS GRANTED TO STUDENTS WHO MATRICULATE AT THE COLLEGE THE RECIPIENT STUDENTS ARE SELECTED BY THE COLLEGE'S SCHOLARSHIP COMMITTEE THE ASSOCIATION LIKEWISE MAKES PERIODIC CASH AND NON-CASH PAYMENTS TO STUDENTS FOR STIPENDS, AWARDS, AND FINANCIAL ASSISTANCE THE ASSOCIATION PROVIDES FINANCIAL ASSISTANCE TO STUDENTS UPON A SHOWING OF NEED AS DETERMINED BY AN INDEPENDENT REVIEW COMMITTEE ESTABLISHED BY THE OFFICE OF THE VICE PRESIDENT OF STUDENT AFFAIRS STIPENDS AND AWARDS ARE PROVIDED TO STUDENTS BASED ON THE ATTAINMENT OF CERTAIN GOALS ALL AMOUNTS REMITTED TO STUDENTS ARE LESS THAN $5,000

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
THE COLLEGE OF STATEN ISLAND ASSOCIATION

Employer identification number
13-2933777

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study ☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4c		No
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	5a		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	5b		No
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	6a		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	6b		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ARAMONA BROWN, PRESIDENT	(i)	0	0	0	0	0	0	0
	(ii)	166,983	0	0	0	42,109	209,092	0
2 EDUARDO RIOS, DIRECTOR	(i)	0	0	0	0	0	0	0
	(ii)	142,469	0	0	0	53,529	195,998	0

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization	Employer identification number
THE COLLEGE OF STATEN ISLAND ASSOCIATION	13-2933777

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	MEMBERSHIP OF THE ASSOCIATION CONSISTS OF THIRTEEN MEMBERS AS FOLLOWS THE PRESIDENT OF THE COLLEGE OR HIS/HER DESIGNEE, THREE ADMINISTRATORS APPOINTED BY THE COLLEGE PRESIDENT, THREE FACULTY MEMBERS SELECTED BY THE COLLEGE PRESIDENT FROM A PANEL OF SIX FACULTY ELECTED ANNUALLY BY THE FACULTY, THE PRESIDENT OF THE STUDENT GOVERNMENT AND TWO UPPER DIVISION AND THREE LOWER DIVISION STUDENTS ELECTED BY AND FROM THE STUDENT BODY OF THE COLLEGE

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	THE PRESIDENT OF THE COLLEGE (A RELATED ENTITY) HAS THE RIGHT OF FINAL REVIEW AND MAY DISAPPROVE ACTIONS TAKEN BY THE BOARD AND SEND THOSE ITEMS BACK TO THE BOARD OF DIRECTORS FOR RECONSIDERATION DURING THIS YEAR THE PRESIDENT HAS NOT HAD REASON TO EXERCISE THIS RIGHT

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	A COPY OF THE 990 WAS CIRCULATED TO BOARD MEMBERS BY THE EXECUTIVE DIRECTOR FOR DISCUSSION AND COMMENT EACH BOARD MEMBER WAS PROVIDED AMPLE OPPORTUNITY TO COMMENT ON THE INFORMATION CONTAINED IN THE 990 PRIOR TO ITS ELECTRONIC FILING WITH THE IRS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	EACH OFFICER, DIRECTOR, TRUSTEE, AND KEY EMPLOYEE OF THE ASSOCIATION IS REQUIRED TO ANNUALLY DISCLOSE ANY CONFLICTS OF INTEREST THAT ARISE BY VIRTUE OF EMPLOYMENT, BOARD SERVICE, OR POSITION WITHIN THE ASSOCIATION THE ASSOCIATION MONITORS COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY THROUGH AN ANNUAL QUESTIONNAIRE/DISCLOSURE STATEMENT THAT IS DISTRIBUTED TO THESE INDIVIDUALS INDIVIDUALS WITH A POTENTIAL CONFLICT ABSTAIN FROM VOTING ON ANY ISSUE WHERE A POTENTIAL CONFLICT EXISTS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE ASSOCIATION'S TOP MANAGEMENT OFFICIAL'S (EXECUTIVE DIRECTOR) COMPENSATION IS SET BY THE ASSOCIATION'S PERSONNEL COMMITTEE THE COMMITTEE USES COMPARABILITY DATA TO SET COMPENSATION STANDARDS (INCLUDING SALARY RANGES AND FRINGE BENEFITS) WHERE FEASIBLE THE COMPENSATION PAID TO THE EXECUTIVE DIRECTOR AND ALL OTHER EMPLOYEES ARE COMPARABLE TO POSITIONS AT THE AFFILIATED COLLEGE WITH SIMILAR RESPONSIBILITIES THE RECOMMENDATIONS OF THE PERSONNEL COMMITTEE ARE SUBJECT TO APPROVAL BY THE BOARD OF DIRECTORS

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	ON THE ORGANIZATION'S WEBSITE.

Return Reference	Explanation
FORM 990, PART VII	THE ASSOCIATION'S BOARD OF DIRECTORS INCLUDES STUDENT REPRESENTATIVES STUDENTS ATTENDING THE COLLEGE ELECT THE STUDENT REPRESENTATIVE TO SIT ONE THE BOARD THESE REPRESENTATIVES MAY RECEIVE STIPENDS FROM THE COLLEGE ASSOCIATION FOR THEIR STUDENT GOVERNMENT EXPERIENCE, HOWEVER, THE ASSOCIATION DOES NOT CONSIDER SUCH PAYMENTS TO BE PAYMENT FOR SERVICES RENDERED ACCORDINGLY, THE ASSOCIATION HAS OPTED NOT TO REPORT THE STUDENT STIPENDS ON FORM 990, PART VII, COLUMN (E) AS COMPENSATION FROM A RELATED ORGANIZATION IT SHOULD BE NOTED THAT NO STUDENT RECEIVED A STIPEND IN EXCESS OF $5,000

Return Reference	Explanation
FORM 990, PART IX, LINE 24E	REPAIRS/RENOVATIONS PROGRAM SERVICE EXPENSES 80,236 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 80,236 COMMENCEMENT & RELATED PROGRAM SERVICE EXPENSES 75,936 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 75,936 EQUIPMENT PROGRAM SERVICE EXPENSES 65,620 MANAGEMENT AND GENERAL EXPENSES 90 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 65,710 CHILDCARE OPERATION PROGRAM SERVICE EXPENSES 56,499 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 56,499 PRINTING/PUBLISHING PROGRAM SERVICE EXPENSES 49,990 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 49,990 MISCELLANEOUS PROGRAM SERVICE EXPENSES 29,497 MANAGEMENT AND GENERAL EXPENSES 438 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 29,935 AWARDS & PRIZES PROGRAM SERVICE EXPENSES 13,990 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 13,990 DUES & ENTRY FEES PROGRAM SERVICE EXPENSES 7,952 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 7,952 BAD DEBT EXPENSE PROGRAM SERVICE EXPENSES 1,317 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,317

Return Reference	Explanation
FORM 990, PART XII, LINE 2(C)	NO CHANGES HAVE TAKEN PLACE DURING THE FISCAL YEAR ENDED JUNE 30, 2015

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Information about Schedule R (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047
2014
Open to Public Inspection

Name of the organization
THE COLLEGE OF STATEN ISLAND ASSOCIATION

Employer identification number
13-2933777

Part I **Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1) THE COLLEGE OF STATEN ISLAND 2800 VICTORY BOULEVARD STATEN ISLAND, NY 10314 13-2547180	EDUCATION	NY	501(C)(3)	LINE 6	N/A		No
(2) RESEARCH FOUNDATION OF CUNY 230 W 41ST NEW YORK, NY 10036 13-1988190	RESEARCH	NY	501(C)(3)	LINE 7	N/A		No
(3) THE COLLEGE OF STATEN ISLAND FOUNDATION 2800 VICTORY BOULEVARD STATEN ISLAND, NY 10314 13-3683723	FUND RAISING	NY	501(C)(3)	LINE 11A, I	N/A		No
(4) THE COLLEGE OF STATEN ISLAND AUXILIARY SERVICES 2800 VICTORY BOULEVARD STATEN ISLAND, NY 10314 13-2936232	EDUCATION	NY	501(C)(3)	LINE 9	N/A		No
(5) THE CITY UNIVERSITY OF NEW YORK 205 E 42ND STREET NEW YORK, NY 10017	EDUCATION	NY	501(C)(3)	LINE 6	N/A		No

Part III **Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity? Yes	(i) No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d	Yes	
e Loans or loan guarantees by related organization(s)	1e	Yes	
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	1o		No
p Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1q		No
r Other transfer of cash or property to related organization(s)	1r		No
s Other transfer of cash or property from related organization(s)	1s	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VI **Unrelated Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	**No**			**Yes**	**No**		**Yes**	**No**	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation